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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION	0010/PTO Rev. 6/95	U.S. Department of Commerce Patent and Trademark Office	Attorney Docket Number	960296.96536
			First Named Inventor	James A. Thomson
	COMPLETE IF KNOWN			
			Application Number	
			Filing Date	
			Group Art Unit	
			Examiner Name	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing				

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) of an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD OF MAKING EMBRYOID BODIES FROM PRIMATE EMBRYONIC STEM CELLS

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
N/A			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

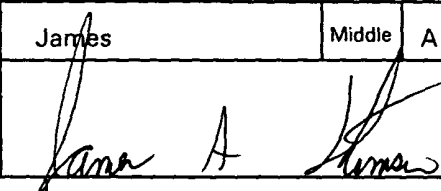
☐ Additional foreign applications numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
<input type="text"/>	<input type="text"/>	

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. MKE14466846

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DECLARATION				Page 2	
<p>I hereby claim benefit under Title 35, United States Code § 120 of any United States application(s), or § 365(C) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application or PCT International application in the manner provided in the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.</p>					
U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)		
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto					
<p>As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and all continuation and divisional applications based thereon, and to transact all business in the Patent and Trademark Office connected therewith:</p>					
<input type="checkbox"/> Firm Name 		Customer Number or label 			
<input checked="" type="checkbox"/> List attorney(s) and/or agent(s) name and registration number below					
Name	Registration Number	Name	Registration Number		
Carl R. Schwartz	29,437	Jean C. Baker David G. Ryser	35,433 36,407		
<input type="checkbox"/> Additional attorney(s) and/or agents named on a supplemental priority sheet attached hereto					
Please direct all correspondence to		<input type="checkbox"/> Customer Number or label		OR <input checked="" type="checkbox"/> Fill in correspondence address below	
Name	Carl R. Schwartz				
Address	Quarles & Brady LLP				
Address	411 East Wisconsin Ave. Suite 2550				
City	Milwaukee	State	WI	Zip	53202-4497
Country	USA	Telephone	(414) 277-5715	Fax	(414) 271-3552
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.</p>					
Name of Sole or First Inventor:		A petition has been filed for this unsigned inventor			
Given	James	Middle	A	Family	Thomson
Inventor's Signature				Date	2/8/00
Residence:	Madison	State	WI	Country	U.S.
Post Office	1807 Regent St.				
Post Office					
City	Madison	State	WI	Zip	53705
Country	U.S.		Applicant Authority		
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto					

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DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet					
Name of Additional Joint Inventor, if any:						A petition has been filed for this unsigned inventor									
Given	Vivienne				Middle	S.	Family	Marshall			Suffix				
Inventor's	Vivienne S. Marshall									Date	2/8/00				
Residence:		Madison				State	WI	Country	U.S.		Citizenship	N.Zealand			
Post Office		4326 Buckeye Rd.													
Post Office															
City	Madison				State	WI	Zip	53716		Country	U.S.		Applicant Authority		
Name of Additional Joint Inventor, if any:						A petition has been filed for this unsigned inventor									
Given	Jennifer				Middle Initial	J.	Family Name	Swiergiel			Suffix				
Inventor's										Date					
Residence:		Roscoe				State	IL	Country	U.S.A.		Citizenship	U.S.			
Post Office		10219 Hawks Point Trl.													
Post Office															
City	Roscoe				State	IL	Zip	61073		Country	U.S.A.		Applicant Authority		
Name of Additional Joint Inventor, if any:						A petition has been filed for this unsigned inventor									
Given					Middle			Family				Suffix			
Inventor's										Date					
Residence:						State			Country			Citizenship			
Post Office															
Post Office															
City					State			Zip			Country			Applicant Authority	
Name of Additional Joint Inventor, if any:						A petition has been filed for this unsigned inventor									
Given					Middle			Family				Suffix			
Inventor's										Date					
Residence						State			Country			Citizenship			
Post Office															
Post Office															
City					State			Zip			Country			Applicant Authority	
Additional inventors are being named on supplemental sheet(s) attached hereto															

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DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet				
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor				
Given	Vivienne				Middle	S.	Family	Marshall			Suffix			
Inventor's										Date	_/_/00			
Residence:	Madison				State	WI	Country	U.S.			Citizenship	N.Zealand		
Post Office	4326 Buckeye Rd.													
Post Office														
City	Madison				State	WI	Zip	53716		Country	U.S.		Applicant Authority	
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor				
Given	Jennifer				Middle Initial	J.	Family Name	Swiergiel			Suffix			
Inventor's	<i>Jennifer J. Swiergiel</i>									Date	<i>2/14/00</i>			
Residence:	Roscoe				State	IL	Country	U.S.A.			Citizenship	U.S.		
Post Office	10219 Hawks Point Trl.													
Post Office														
City	Roscoe				State	IL	Zip	61073		Country	U.S.A.		Applicant Authority	
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor				
Given					Middle		Family				Suffix			
Inventor's										Date				
Residence:					State		Country				Citizenship			
Post Office														
Post Office														
City					State		Zip			Country			Applicant Authority	
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor				
Given					Middle		Family				Suffix			
Inventor's										Date				
Residence:					State		Country				Citizenship			
Post Office														
Post Office														
City					State		Zip			Country			Applicant Authority	
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